

UNITED STATES BANKRUPTCY COURT
DISTRICT OF NEW JERSEY

LAW OFFICES OF LEE M. PERLMAN
Lee M. Perlman, Esquire
Attorneys for Debtor
1926 Greentree Road, Suite 100
Cherry Hill, NJ 08003
856-751-4224

In Re:

Myra Phillips

Case No.: 19-32733 MBK

Chapter: 13

Judge: MBK

**CERTIFICATION OF DEBTOR(S) IN SUPPORT OF
COVID-19 CHAPTER 13 PLAN MODIFICATION**

I, Myra Phillips are the debtor(s) in the captioned Chapter 13 case and make this Certification under penalty of perjury in support of the COVID-19 Chapter 13 Plan Modification filed separately on the docket.

1. The Chapter 13 Plan was originally confirmed by order entered on 12/05/2019.
2. I was current with plan payments through 8/30/2021.
3. I was current with post-petition mortgage payments through [date], on property located at [property address (if applicable) – skip if not applicable; add additional paragraphs if there is more than one mortgage or more than one property].
 - a. The mortgage payments referred to above are [check one]:
☐ contractual payments
☐ adequate protection payments
 - b. I am current with post-petition real estate taxes on the property located at [address]
☐ YES ☐ NO
 - c. I have current liability insurance on the property and can provide proof thereof.
☐ YES ☐ NO
4. If the confirmed plan includes a cram down on a mortgage, then answer the following:
 - a. I am current with post-petition real estate taxes on the property located at [address of prop being crammed down]
☐ YES ☐ NO

b. I have current liability insurance on the property and can provide proof thereof.

_____ YES _____ NO

5. I was current with post-petition auto payments through [date], on the following automobile(s): [describe].

6. The change in my household income previously reported on Schedule I is \$[amt of reduction in income].

My current household income is \$[amt]. I have attached a current paystub or proof of the change in income to this certification.

7. As a result of COVID-19, I have suffered a material financial hardship which has impacted me in the following way:

I am an aid at a school and since the start of the school year, my pay and hours have decreased due to not needing as many aids due to Covid-19. I also had dental work done that I have to pay out of pocket for.

I certify that the foregoing statements made by me are true to the best of my knowledge, information, and belief. I am aware that if any of the foregoing statements made by me are willfully false, I am subject to punishment.

12/2/2021

Date

/s/ Myra E. Phillips

Myra E. Phillips